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DAY-1 Poster Presentation





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Educational needs of palliative care for heart failure patients among cardiovascular nurses

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The world's aging population is rapidly increasing and providing palliative care for not only cancer patients but also non-cancer patients such as heart failure and Chronic Obstructive Pulmonary Disease (COPD) is essential. Although nurses think it is important to give palliative care to heart failure patients, they also feel difficulty in proving palliative care for those patients. Conducting seminars regarding palliative care for heart failure patients, therefore, is needed to relieve nurses' difficulty in providing palliative care. This study examined interest in educational contents of palliative care among cardiovascular nurses. Method: A survey using a questionnaire was conducted, the survey items included demographics and interesting educational contents of palliative care. Findings: The nurses responded that most interesting educational content was non-pain physical symptom management and next were decision-making, advance care planning, mental symptom management, and pain management. Compared to these contents, they were less interested in grief care, spiritual care, team care, and family care. Conclusion & Significance: Heart failure patients have various physical symptoms such as dyspnea and edema, and the nurses in this study showed educational needs regarding symptom management including pain and mental symptoms. These results suggest that palliative care seminar such as symptom management especially physical symptoms is needed for cardiovascular nurses to enhance palliative care practice.

Recent publications

- 1. Matsui M (2022) Nurses' symptom management and views on death and caring for heart failure and chronic obstructive pulmonary disease. Int J Palliat Nurs 28:214-221.
- 2. Matsui M, Capezuti E (2014) Differences in perceived autonomy among American and Japanese older adults. J Gerontol Nurs 40:36-44.
- Matsui M, Kanai E, Kitagawa A, Hattori K (2013) Care managers' views on death and caring for older cancer patients in Japan. Int J Palliat Nurs 19:606-11

Biography

Miho Matsui is a professor in the division of nursing at National Defense Medical College, Japan. Her major is gerontological nursing, and research interest is palliative and end-of-life care for non-cancer patient.

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DAY-2 E-poster Presentation





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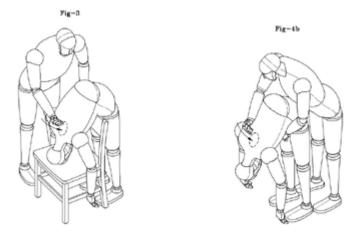
A simple, effort-less, safe resuscitation method for choking victims

Puthalath Koroth Raghuprasd

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Choking deaths occur when the victims accidentally inhale objects which then lodge in the larynx and obstruct the airflow. Adults usually choke on food boluses, while infants and young children inhale in addition to food, foreign bodies such as coins and parts of toys. The abdominal thrust, popularly known as the Heimlich maneuver is used worldwide to resuscitate choking victims, ever since it was described in 1975. While this procedure is effective in ideal circumstances and has saved many lives, it has some drawbacks. These are mostly related to the need to wrap the rescuer's arms around a large adult victim, clasp them above the umbilicus and then exert enough force to almost lift the subject up. Another relatively common problem is such efforts leading to trauma to internal organs or the xiphisternum. Statistical studies also show that the popularization of this technique has not reduced the number of deaths from choking, at least in the United States; in fact, the numbers increased from around 3,000 to 4000 between 1975 and 2000. From the year 2000 to 2020 the number of such deaths have remained relatively constant at 4000-5000 cases per year. When such deaths occur in children and otherwise healthy adults, it is particularly distressing. Several external devices have been used to aid recovery in victims who have failed the abdominal thrust procedure, but in real life situations, such devices may not be readily available.

We sought to devise an effective, easy to perform, and safe resuscitation method, that also does not require any special equipment. The method we have developed can be performed with or without the aid of an object such as the backrest of a chair; when it is not available, the rescuer's arm placed over the middle of the abdomen of the victim can be used, and then asking them to cough, repeatedly if necessary. It is anticipated that most of the time the foreign objects will be expelled by just these two measures, as the inverted U-shaped position of the victim helps through gravity, and the coughing efforts in this position is also much more effective in expelling the offending material. If the foreign body is still not ejected, thump repeatedly over the space below the root of the neck as noted in the figures below:





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Figure. 3 above shows the optimal/desired method, using the top of the back rest of a chair to exert the abdominal thrust. It also shows the site for applying the thumps if the offending object has not already been expelled.

Figure. 4b shows an alternative method when a chair is not available; here one arm of the rescuer is used to support the victim, and to exert the thrust on the abdomen.

The same methods can be used in pregnant women, but we recommend stationing the top of the back rest at just below the xiphisternum. Babies and toddlers can be held upside down by their ankles and, if necessary, gentle thumps applied to below the root of the neck.

Recent publications

- 1. Raghuprasad, P.K.: Improved resuscitation method for resuscitation of choking victims: Open Journal of Emergency Medicine. Vol.9, No 4, December 2021
- 2. Lin, A.Y et al: Familial eosinophilia: clinical and laboratory results in a US kindred: 1998 American J Med. Genetics 76:229-237
- Dvorak A.M, et al.: 1984 Histamine releasing activity (HRA) III-Induced human basophil histamine release by provoking noncytotoxic granule exocytosis. Clinical Immunology and Immunopathology. 32. 142-150

Biography

Puthalath Koroth Raghuprasd is an allergist/immunologist, practicing in Odessa, Texas, the USA. His interests are, besides research, writing in prose and verse, painting, inventing and Astronomy.

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Challenges experienced by portuguese professionals in humanitude care for institutionalized elderly people during the pandemic

Liliana Vanessa Lúcio Henrique University of Porto, Portugal

Method:This is a qualitative study, supported by reflections on the Humanitude Care Methodology, carried out with workers from different areas in a nursing home for elderly people in Portugal. Data collection took place between September and October 2020, from individual and online interviews. The categorization proposed by Bardin was adopted as the analysis technique.

Results:Three categories emerged: (1) self-protection and of the other with the subcategories fear of being contaminated and fear of contaminating the elderly; (2) maintenance of affective relationships, broken down into the subcategories absence of family members in the nursing home and personal protective equipment as a barrier to communication and approximation; and (3) confinement of the elderly who attended the Day Center, with the subcategories lack of family support/loneliness and change in the elderly's routine.

Conclusion: The main challenges experienced by Portuguese workers are related to the necessary changes in the performance of care practices due to the use of personal protection that was not used before, limitations in affective relationships, and restrictions in interaction spaces.

Descriptors: Coronavirus Infections; Old Age Assistance; Humanization of Assistance; Institutionalization.

Recent publications

- 1. Liliana Vanessa Lúcio Henrique; Desafios da metodologia de cuidado humanitude na assistência aos idosos institucionalizados em tempos de pandemia; 2021-10-19; DOI: 10.33448/rsd-v10i13.21284
- Liliana Vanessa Lúcio Henrique; Metodologia de Cuidado Humanitude: Repercussões na atuação dos profissionais em instituição para idosos durante a pandemia da COVID-19; 2021-05-23; DOI: 10.33448/rsd-v10i6.15529
- Liliana Vanessa Lúcio Henrique; Caring for the Human Dignity of the Institutionalized Elderly: a scoping review protocol; 2020-12-21; DOI: 10.15517/revenf.v0i40.43243

Biography

Liliana Vanessa Lúcio Henrique is a Nurse, completed her studies at the University of Porto, Portugal. Her interests are Patient care, Personality, Elderly, and Institutionalization.

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Model to reduce the effects of unsafe interactions between family members in the digital era

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Background: people's collaboration generates various feelings in individuals, influencing their actions and well-being; respectable and noblest collaboration between them increases their health, and poor, terrible communication declines welfare.

Aim: highlight the severe effects of unsafe communication between family members for individuals and how to downplay them in the digital era.

Material& Method: qualitative study performed by the author in the community, from 2008 to 2023, relating to the people interaction's effects on their health and how to balance the worst ones.

Findings: in a large family, the family physician noticed the repetition of stressful interactions between its members; soon after that, some adult individuals presented depression, headache, even vertigo, and transitory arterial hypertension noticed. Repetitive unsuitable communications lead from transitory to permanent arterial hypertension.

The patient's family medical history includes parents, sisters with arterial hypertension, and brothers with type 2 diabetes.

The patient's medical history: one patient with dyslipidaemia, 2012.

Actions were taken: the family doctor managed the situation using drugs and behaviour-change information. She informed the individuals about improper communication's negative influence on people's health and how to mitigate the effects on the individual in the digital era. The doctor started an educational program in the community.

Results: drug treatment, stopping stressful people interactions, and calming and comforting activities, including using IT devices, improved clinical outcomes.

Conclusion: repeated distressing people interactions initiate, maintain and accelerate the evolution of arterial hypertension. This disorder's management must include IT advancement for the individual benefit.

Implication: various words' energy and attitudes activate the nervous system working. Usually, middle-aged people and senior adults are more vulnerable in front of upsetting, disturbing communication. The disproportionate and damaging energy of peoples unsafe communication produces arterial hypertension in vulnerable individuals. Interruption of unpleasant collaboration where and when necessary, suitable drugs and the use of IT devices for relaxing and lowering its annoying effects on people's health are required. A polite communication style is mandatory; educational programs are essential.

Recent publications

- 1. Sofica Bistriceanu; The Effects of Improper Communication on the Brain, Heart, and Blood Vessels. 15.03.2023
- 2. Sofica Bistriceanu; Unskilled delivery of bad news leads to brain haemorrhage in vulnerable people. 05.12.2022



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Biography

Sofica Bistriceanu studied in Romania at the 'Gr. T. Popa' lasi University, and graduated as MD in 1984, research in family medicine, Maastricht University, 2000, Ph.D. in 2009, Iasi, at the same institution. She joined the European, American, Asian Primary Care Research Group, American Academy on Communication in Healthcare, APTR, IHI, NICHQ, EPCCS, EURACT, WONCA Meetings. She is a member of Academy for Professionalism in Health Care. Dr Sofica Bistriceanu is the author of more than 70 research studies shared abroad and received awards for some of them. She is a member of The Journal of Patient Experience (JPX) Editorial Review Board. She is the representative of the Academic Medical Unit located in NT, ROU. She is the author of seven volumes of poems published by Chronica Iasi Publishing House, and Time, Iasi Publishing House.

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Exploring community nurses views on the implementation of a local weight management pathway

Sophie Hinks University College Isle of Man, UK

Overweight and obesity is a major cause of non-communicable diseases globally, nationally and locally. It also has a significant cost to both the individual and society.

Weight management pathways (WMP) are a recognized tool used to reduce levels of overweight and obesity and are recommended by both the World Health Organization (WHO) and the National Institute for Health and Care Excellence (NICE). Yet locally there is no WMP in place. A WMP, to best meet the local population's needs, along with a guidance document was designed based on current WMP's in the UK. This was then shown to participants of the focus group.

This research focuses on community nursing staff's views on the implementation of a local WMP through the use of interpretative phenomenology. A focus group was conducted which sought the views of adult community nursing staff on current weight management procedures and their views on the implementation of a WMP. The data was then thematically analyzed with the use of the Theoretical Domains Framework (TDF).

The findings acknowledge the lack of a current WMP as well as the limitations of the Malnutrition Universal Screening Tool (MUST) assessment, which is what is currently utilized in practice, as it does not trigger interventions for overweight or obesity. The need for and benefits of a local WMP were recognized by participants, however the need for training in the use of the tool was also recognized.

Potential barriers to its implementation were deemed to be the sensitive subject, a lack of staff knowledge and patients' willingness to change. The recognition of these barriers reflected background literature and could aid in the implementation of a WMP by ensuring that they have been considered and potentially prevented. Further barriers including cost and communications systems were discovered that weren't recognized in previous research.

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The stress level and stress-related factors among ambulance drivers of ruamkatanyu and poh teck tung foundation and the effect of the progressive muscle relaxation intervention toward stress

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This study aimed to study the relationship among general characteristics, work-related factors and the stress level in ambulance drivers at Ruamkatanyu and Poh teck tung foundation. Eighty-three self-administered questionnaires were included in the analysis. The Progressive muscle relaxation was introduced to reduce the stress level in 20 subjects, compared with another 23 subjects in the control group.

The most stress level was mild stress (43.4%). The results showed that stress was significantly associated with marital status (p-value = 0.000), monthly income (p-value = 0.000), household monthly income (p-value = 0.000), income sufficiency (p-value = 0.000), type of shift work per day (p-value = 0.001), number of the patient or injured person per day (p-value = 0.035), emergency severity index (ESI) in resuscitation (red) (p-value = 0.000), neck pain (p-value = 0.022), shoulder pain (p-value = 0.020), waist pain (p-value = 0.016) and pressure from patient and the family members (p-value = 0.000).

The study showed the difference in mean stress scores after the intervention program between experimental and control groups were significant (p-value < 0.05). The reaction time before and after the progressive muscle relaxation practice in experimental group were significantly difference (p-value < 0.001).

The conclusion this study revealed that the stress level in ambulance drivers was average in mild level. The general characteristics factors, work-related factors, ergonomics factors, and social psychology factors have related the stress. The progressive muscle relaxation was implemented, and the result showed the stress score was decreased by the post evaluated.

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Intraosseous administration of freeze-dried plasma in the prehospital setting

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Background: Freeze dried plasma (FDP) is a commonly used replacement fluid in the prehospital setting when blood products are unavailable. It is normally administered via a peripheral intravenous (PIV) line. However, in severe casualties, when establishing a PIV is difficult, administration via intraosseous vascular access is a practical alternative, particularly under field conditions.

Objectives: To evaluate the indications and success rate of intraosseous administration of FDP in casualties treated by the Israel Defense Forces (IDF).

Methods: A retrospective analysis of data from the IDF-Trauma Registry was conducted. It included all casualties treated with FDP via intraosseous from 2013 to 2019 with additional data on the technical aspects of deployment collected from the caregivers of each case.

Results: Of 7223 casualties treated during the study period, intravascular access was attempted in 1744; intraosseous in 87 of those. FDP via intraosseous was attempted in 15 (0.86% of all casualties requiring intravascular access). The complication rate was 73% (11/15 of casualties). Complications were more frequent when the event included multiple casualties or when the injury included multiple organs. Of the 11 failed attempts, 5 were reported as due to slow flow of the FDP through the intraosseous apparatus. Complications in the remaining six were associated with deployment of the intraosseous device.

Conclusions: Administration of FDP via intraosseous access in the field requires a high skill level.

Key Words: Bone injection gun, freeze dried plasma (FDP), intraosseous vascular access, peripheral intravenous (PIV) line.

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The relationship between exposure to traumatic events in the delivery room, post traumatic stress symptoms, personal resilience, organizational commitment and professional quality of life among midwives

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Background: The work of midwives is emotionally challenging. Midwives share moments of joy when a baby is born and attend difficult events of loss and trauma. Childbirth complications and exposure to emergencies and loss can affect their professional quality of life and functioning. This aspect of midwives' practice has not been sufficiently researched.

Aim: To examine the associations between exposure to traumatic events, post-traumatic symptoms, and personal resilience, with professional quality of life and organizational commitment among hospital midwives.

Methods: Participants in this cross-sectional study conducted in 2020 comprised 131 midwives from three general hospitals in Israel. Data were collected using a structured self-administered questionnaire that examined socio-demographic characteristics, exposure to traumatic events during childbirth, personal resilience, post-traumatic symptoms, professional quality of life, and organizational commitment.

Results: The three most traumatic events for midwives were: neonatal death or feared death, maternal death or feared death, and stillbirth. The more frequent the exposure to traumatic events, the more numerous and intense the post-traumatic symptoms. The more numerous and intense the post-traumatic symptoms, the higher the level of professional burnout and/or compassion fatigue and/or the lower the compassion satisfaction. Higher compassion satisfaction and lower professional burnout were associated with higher organizational commitment. Personal resilience, country of birth, post-traumatic symptoms, and organizational commitment predicted compassion satisfaction.

Conclusions: Midwives' exposure to traumatic events is associated with the onset of post-traumatic symptoms, impaired professional quality of life, and reduced organizational commitment, and is accompanied by burnout and compassion fatigue.

There is a need to address this issue in training programs and to develop organizational support and policies to improve midwives' well-being and quality of care.

Key words: Traumatic experiences, midwives, quality of life, burnout, organizational commitment, personal resilience.

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